

*Parents' Guide to*

# Hemoglobin H Disease



**California Department of Health Services**  
Newborn Screening Program  
Genetic Disease Branch

## To Parents:

California State Law requires that all babies have the newborn screening test before leaving the hospital.

A few drops of blood were taken from your baby's heel. One of the tests was for hemoglobin disorders.

Your health care provider may have recently told you that tests show that your baby has a blood disorder called hemoglobin H disease or hemoglobin H-Constant Spring disease.

This booklet was written to help parents learn more about hemoglobin H disease. People with hemoglobin H disease have varying symptoms.

Use this booklet to discuss this disorder with the specialists at a hematology center and to help you learn more about how to care for your child. A list of state approved hematology centers is included at the back in this booklet.



## How Did My Baby Get Hemoglobin H Disease ?

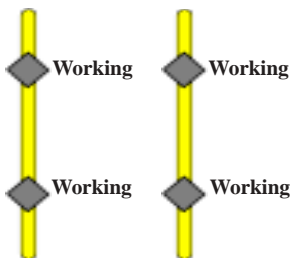
Hemoglobin H disease is a blood disorder that is inherited. Inherited means it is passed down from parent to child in the genes. Genes determine eye color, height, and other features including hemoglobin type. The baby received genes from both parents that resulted in the baby having hemoglobin H disease.

### What is Hemoglobin?

Hemoglobin is found in the red blood cells. It gives the blood its red color and carries oxygen to all parts of the body. It is made up of iron and protein chains called globins. There are two kinds of globin in the usual adult hemoglobin called alpha globin and beta globin. The usual adult hemoglobin, called hemoglobin A, has 2 alpha chains and 2 beta chains.

### What is Alpha Thalassemia?

Alpha thalassemia is a condition in which there is a decrease in the amount of alpha globin produced. Alpha globin is one of the protein chains that makes up hemoglobin. The amount of alpha globin produced is determined by the number of working genes. Most people have 4 working genes that make alpha globin.



normal working genes

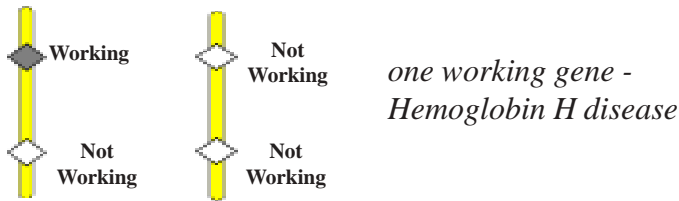
People with alpha thalassemia may have 0 to 3 working genes. The number of working genes determines the type of alpha thalassemia. People with 3 working genes are called *silent carriers*. People with 2 working genes have *alpha thalassemia trait*. People with only one working gene have *hemoglobin H disease*. People with no working genes have *alpha thalassemia major*. The more working genes missing, the more serious the type of alpha thalassemia.

Alpha thalassemia is more common in people from China, Southeast Asia (for example: Laos, Cambodia, and Vietnam), the Philippines, and other Asian countries, Mediterranean and Middle Eastern countries. However, people from any ethnic group can have a type of alpha thalassemia.



## What is Hemoglobin H Disease?

People with hemoglobin H disease have only one working gene for alpha globin. They make less than the usual amount of alpha globin chains. Because of this the hemoglobin that they make is more unstable causing the red blood cells to break down more quickly. The result is fewer red blood cells, a condition called anemia.



Many people with hemoglobin H disease do not have serious health problems. However, since this disease affects a person's hemoglobin, they often have mild to moderate anemia which can cause them to be more tired. Sometimes the anemia can get worse and lead to other problems. However, these are rare except for children with hemoglobin H-Constant Spring disease which is a more severe form of this disorder.

## **What is Hemoglobin H-Constant Spring Disease?**

Hemoglobin H-Constant Spring disease produces a longer than usual alpha globin chain. This causes the hemoglobin to be even more unstable than in hemoglobin H disease. This causes the red blood cells to break down faster than usual so there are less red blood cells in the body. This results in a more severe anemia. Other complications often include an enlarged spleen, gallstones, increased risk for infections, jaundice, and leg ulcers.

## **How Can I Care for My Baby?**

The hematologist and other staff at the center will discuss how to care for your baby. Most people with hemoglobin H disease can lead relatively normal lives with proper treatment. Some may need occasional or ongoing blood transfusions. Children with hemoglobin H disorders are more likely than other children to get infections. Viral infections and fevers cause the red blood cells to break down faster, leading to anemia. To prevent problems call your baby's doctor or the hematology center whenever your child becomes ill.

Certain medications, household products, and fava beans must be avoided. They may cause severe anemia if your child comes in contact with them. These items may cause the red blood cells to break down faster. Treatment for people with hemoglobin H disorders may include taking a B vitamin called folic acid, avoiding the items listed on the next page and prompt treatment of infections. Iron overload can be a problem for the child getting blood transfusions. Your child should not be given iron medication unless the blood test shows he or she has iron deficiency anemia. Please check with your hematology center before giving iron supplements to your child.

## **What Should My Child Avoid?**

On the next page is a list of medications and household products to avoid. Take this list with you to any doctor's appointment or emergency room visit. Tell the doctor your child has hemoglobin H disease. Show this list to any doctor seeing your child and to pharmacists who are filling prescriptions for your child. Do not give your child over-the-counter medicine without talking to your doctor about them first.

## **Should My Baby Avoid Anything Else?**

Your child should avoid contact with fava beans and mothballs. Both of these can cause severe anemia. Do not have these in your home. Other types of beans such as red, black, and pinto beans or lentils are not a problem. Swallowing or inhaling mothballs can be very harmful to your child. Call your doctor immediately if your child swallows a mothball.

## List of Medications and Products To Avoid\*

### ***Sulfa Drugs***

Sulfacetamide (eye drops)  
Sulfapyridine  
Sulfasalazine  
(Salicylazosulfapyridine)  
Sulfanilamide  
Dapsone

### ***Antimalarials***

Primaquine  
Chloroquine  
Hydroxychloroquine  
sulfate

### ***Other Antibacterials***

Nalidixic acid (Negram)  
Nitrofurantoin  
Furazolidone  
Chloramphenicol  
Beta-aminosalicylic acid  
Ciprofloxacin  
Doxycycline

### ***Analgesics***

Aspirin  
(Acetaminophen is  
safe as alternative)  
Phenacetin  
Acetanilide

### ***Tuberculosis Drugs***

Isoniazid  
Rifampin

### ***Folic Acid Antagonists***

Pyrimethamine

### ***Other Items***

Iron Supplements <sup>1</sup>  
Vitamin K analogues  
Quinidine Gluconate  
Phenazopyridine (pyridium)  
Toluidine Blue (a dye)  
Methylene Blue (a dye)  
Naphthalene (Mothballs)

<sup>1</sup>Unless laboratory proven iron deficiency.

Source: Bull WHO 1989, Beutler 1994, updated by Michael Irvin,  
School of Pharmacy, UCSF, 1998

\*The medical literature suggests that these medications and products may cause problems for people with hemoglobin H disease; however no studies have been conducted to prove that these substances are actually harmful for people with Hemoglobin H Disease.

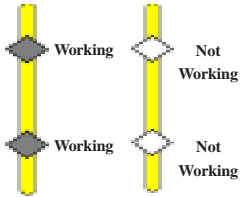


## What Are the Chances of Having Another Child with Hemoglobin H Disease?

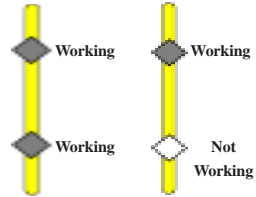
There are some combinations of alpha globin gene inheritance that can cause serious health problems. Special blood tests can tell you which combination you have and your chances of having another child with hemoglobin H disease in future pregnancies. Family testing should be discussed with the hematology center doctor.

For example, if one parent has alpha thalassemia trait and the other parent is a silent carrier, with each pregnancy, they have a 25% chance of having a child with 4 working alpha globin genes (***usual alpha globin***), a 25% chance of having a child with 3 working alpha globin genes (***silent carrier***), a 25% chance of having a child with 2 working alpha globin genes (***alpha thalassemia trait***), and a 25% chance of having a child with one working alpha globin gene (***hemoglobin H disease***).

## alpha thalassemia trait



## silent carrier



4 working  
genes

*(usual alpha  
globin)*



3 working  
genes

*(silent carrier)*



2 working  
genes

*(alpha  
thalassemia  
trait)*



1 working  
gene

*(hemoglobin  
H disease)*

# What Is Your Chance of Having a Baby With Hemoglobin H Disease?

(Complete this with your genetic counselor after you have received your results.)



\_\_\_\_\_ working  
genes



\_\_\_\_\_ working  
genes



\_\_\_\_\_ working  
genes



\_\_\_\_\_ working  
genes



\_\_\_\_\_ working  
genes



\_\_\_\_\_ working  
genes

## When Should I Call My Hematology Center?

A hematology center is a specialized center which has a team of experts who are trained in the treatment of hemoglobin disorders. They can provide your child with the special care related to hemoglobin H disease.

If your baby experiences any of the following symptoms of severe anemia contact your doctor or hematology center **immediately**.

- ◆ extreme fatigue
- ◆ pale and/or yellowish skin
- ◆ whites of the eyes become yellow
- ◆ stomach and/or back pains
- ◆ dark black stool
- ◆ dark orange urine



# **California Children's Services Sickle Cell Diseases/Hemoglobinopathies Centers**

## **Northern California**

**Alta Bates**, Berkeley, 510/204-1609

**UC Davis Medical Center**, Sacramento, 916/734-2782

**UC San Francisco General Hospital**, San Francisco, 415/206-3770

**Children's Hospital - Oakland**, Oakland, 510/428-3372

**Kaiser Permanente No. California**, Oakland, 510/596-6592

**Children's Hospital at Stanford**, Palo Alto, 415/497-8953

**Highland Hospital**, Oakland, Oakland, 510/534-2055

## **Central California**

**Valley Children's Hospital**, Madera, 559/353-5460

**Saint Agnes Medical Center**, Fresno, 559/449-5378

## **Southern California**

**City of Hope National Medical Center**, Duarte, 626/359-8111 ext. 2915

**Orthopedic Hospital**, Los Angeles, 213/742-1402

**Los Angeles County-USC Medical Center**, Los Angeles, 323/226-7622

**UC Los Angeles Medical Center**, Los Angeles, 213/825-6708

**Childrens Hospital of Los Angeles**, Los Angeles, 323/669-4151

**Cedars-Sinai Medical Center**, Los Angeles, 310/855-4423

**Kaiser Permanente Med. Ctr., So. California**, Los Angeles, 323/857-4462

**Harbor-UCLA Medical Center**, Torrance, 310/222-4157

**Long Beach Memorial Medical Center**, Long Beach, 562/492-1062

**Loma Linda Univ. Medical Center**, Loma Linda, 909/799-5283

**UC Irvine Medical Center**, Orange, 714/456-8411

**Children's Hospital of Orange County**, Orange, 714/532-8636

**UC San Diego Medical Center**, San Diego, 619/543-5670

## Notes And Questions

# California Department of Health Services

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Genetic Disease Branch  
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